## Exhibit O

DLN: 93493316049739 Return of Organization Exempt From Income Tax e 2 of 20MB No 1545-0047 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 **C** Name of organization D Employer identification number B Check if applicable Project on Fair Representation Inc ☐ Address change 47-2593047 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Amended return 3571 Far West Blvd Unit 17 □ Application pending (703) 505-1922 City or town, state or province, country, and ZIP or foreign postal code Austin, TX  $\,$  78731  $\,$ G Gross receipts \$ 282,728 Name and address of principal officer H(a) Is this a group return for Edward Blum □Yes ☑No subordinates? 3571 Far West Blvd 17 H(b) Are all subordinates Austin, TX 78731 ☐ Yes ☐No included? Tax-exempt status **✓** 501(c)(3) 4947(a)(1) or □ 527 If "No," attach a list (see instructions) 501(c)( ) **◄** (insert no ) **H(c)** Group exemption number ▶ Website: ► N/A L Year of formation 2014 M State of legal domicile TX ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ **K** Form of organization Summary 1 Briefly describe the organization's mission or most significant activities To defend human and civil rights secured by law including the facilitation of pro bono legal representation to individuals and entities that wish to challenge government distinctions and preferences made Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . Number of independent voting members of the governing body (Part VI, line 1b) 4 0 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Prior Year Current Year** 97,250 282,728 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 0 o 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 97,250 282,728 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 120,000 120,000 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶13,097 65,603 467,754 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 185,603 587,754 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . -88,353 -305,026 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 296,397 406,371 415,000 21 Total liabilities (Part X, line 26) . Net assets or fund balances Subtract line 21 from line 20 -8,629 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-10-13 Signature of officer Sign Here EDWARD BLUM Executive Director Type or print name and title Date Print/Type preparer's name Preparer's signature PTIN Check 🗹 ıf P01440736 Paid self-employed Firm's name RICHARD G FISHER Firm's EIN ▶ Preparer Use Only Firm's address ▶ 922 BENT CREEK CT Phone no (281) 342-1932 RICHMOND, TX 77406 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

Form	990 (2018)					Page
Pa	art III State (1) engle	o <u>flP20gram050=7676</u>	A Conputs	himent 49-16 F	iled 04/05/21 Page 3 c	of 25
	Check if Sched	dule O contains a respor	se or note to	any line in this Part III .		🗆
1	Briefly describe the o					
		nghts secured by law ind actions and preferences		ılıtatıon of pro bono lega	l representation to individuals and e	entities that wish to
2	Did the organization i	undertake any significar	it program ser	vices during the year wh	uch were not listed on	
		990-EZ?				☐ Yes ☑ No
	If "Yes," describe the	se new services on Sche	edule O			
3	Did the organization of	cease conducting, or ma	ike significant	changes in how it condu	cts, any program	
						☐ Yes ☑ No
4	Describe the organiza Section 501(c)(3) and	ition's program service a	accomplishmerns are required	to report the amount of	argest program services, as measu f grants and allocations to others, th	
4a	(Code	) (Expenses \$	562,097	including grants of \$	0 ) (Revenue \$	0 )
	See Additional Data		, 			,
4b	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$		ıncludıng grants of \$	) (Revenue \$	)
4d	Other program servic	es (Describe in Schedul inclu	e O ) ding grants of	\$	) (Revenue \$	)
40	Total program serv		562.0			

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Par	tiv CheckDagor Reagurer-Schedule P Document 49-16 Filed 04/05/21 Page 4 of	25		
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 🕏	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	ı	No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	ı	No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or $X$ as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section $170(b)(1)(A)(u)$ ? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	142		No

**b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) . . . .

lines 1c and 8a? If "Yes," complete Schedule G, Part II

**20a** Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

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As Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule K. If "No." go to line 25a.  24a No. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year of Did the organization and the organization of the organization of the organization and the organization of the organization and the organization organization and the organization and the organization organization and the organizat		Check Sign Regulation Solice Brown Microsoft Chief 143-10 Filed 04/03/21 Fage 3 01		Yes	No
the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. I"No," go to line 25a.  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24b  c Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d  5a Section \$01(c)(3), \$01(c)(4), and \$01(c)(29) organizations.  Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.  b I bit the organization have the it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2?  If "Yes," complete Schedule L, Part I.  c Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or forms officers, directors, trustees, key employees, substantial contribution or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV.  D did the organization provide a grant or other assistance to an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  28b	23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			No
24b   24c   24d   25d   26d   26d   27d   28d	24a	the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and	24a		No
to defease any tax-exempt bonds?  24c   Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d   24d   25a   Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I   Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction been reported on any of the organization prorise 990 or 990 cf. 27   Dif "Yes," complete Schedule I, Part I   Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule I, Part II   Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I, Part III    8 Was the organization a party to a business transaction with one of the following parties (see Schedule I, Part IV   Did the organization aparty to a business transaction with one of the following parties (see Schedule I, Part IV   Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule I, Part IV   Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M   Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M   Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M   Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule N, Part I   Did the organization related to any tax-exempt or taxable entity? If "Yes," comple	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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Part IV					
A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  28b N  A family member of a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I.  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.  All Form 990 filers are required to complete Schedule O.	а				
Part IV.  c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.  9 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  10 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  1 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  2 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II.  3 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I.  4 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Inne 1  5 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Inne 2  5 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Inne 2  7 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  8 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.  All Form 990 filers are required to complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.	h		28a		No
officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.  9 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  10 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  1 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  2 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  3 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I.  4 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part III, or IV, and Part V, line 1  5 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  5 If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  5 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  5 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  8 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.  3 All Form 990 filers are required to complete Schedule O.	,		28b		No
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	С		28c		No
contributions? If "Yes," complete Schedule M	9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II.  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I.  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	0		30		No
If "Yes," complete Schedule N, Part II	1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
33 N  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	2		32		No
Part V, line 1		301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	4		34		No
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
organization? If "Yes," complete Schedule R, Part V, line 2	b		35b		
Is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  B Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	6		36		No
All Form 990 filers are required to complete Schedule O	7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
Part V Statements Regarding Other IRS Filings and Tax Compliance	8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Check if Schedule O contains a response or note to any line in this Part V	Par	· · · · · · · · · · · · · · · · · · ·			
				Yes	No

1a

1b

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

**b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

0

**1**c

	this return	2a		0			
b	If at least one is reported on line 2a, did the organization file all required federal employ				2b	'	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see	ee insti	ructions)				
3а	Did the organization have unrelated business gross income of \$1,000 or more during the	e year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation	ın Sch	nedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signa financial account in a foreign country (such as a bank account, securities account, or oth				4a		No
b	If "Yes," enter the name of the foreign country	J F		4.D.\			

Nο

Nο

Νo

Nο

Nο

Nο

Nο

5c

6a

6b

7a

7b

7c

7e

7f

7g

7h

8

9a

9h

12a

13a

14a

14b

15

No

Form **990** (2018)

7d

10a

10b

11a

11b

12b

13b

1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	48	а
	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	58	a
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	51	ь
		-	$\overline{}$

6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization

If "Yes," did the organization notify the donor of the value of the goods or services provided? . . .

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

Gross income from other sources (Do not net amounts due or paid to other sources 

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

which the organization is licensed to issue qualified health plans . . . . Enter the amount of reserves on hand . . . . . . . . . . . . . . . .

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . . .

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . . Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

**b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were

Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file

Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

solicit any contributions that were not tax deductible as charitable contributions? . . .

Organizations that may receive deductible contributions under section 170(c).

d If "Yes," indicate the number of Forms 8282 filed during the year . . . .

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . .

Section 501(c)(7) organizations. Enter

11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders .

c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . .

5a

b

Page 6

	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year label 1a			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 2			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
-	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶Richard Fisher 922 Bent Creek Richmond, TN 77406 (281) 342-1932			

Form 990 (2018)										Page <b>7</b>
Part VII Comp@@@@ioin @f) Office (\$7 6 and Independent Contracto		<b>Eteles</b>	eKė	<b>49</b>	n[p(	oy <del>¢</del> e	<b>‡e</b> €	i <b>g⊭(\$5</b> ⊄ <u>∂n</u> pe	? <b>⊊</b> ged&n∱l <u>&amp;</u> y	ees,
Check if Schedule O contains a resp										🗆
Section A. Officers, Directors, Truste								<u> </u>		
1a Complete this table for all persons required to year										ganızatıon's tax
<ul> <li>List all of the organization's current officers of compensation Enter -0- in columns (D), (E), a</li> </ul>	and (F) if no cor	mpensa	tion	was	paid	4				
<ul> <li>List all of the organization's current key em</li> <li>List the organization's five current highest of</li> </ul>										
who received reportable compensation (Box 5 of organization and any related organizations										
• List all of the organization's <b>former</b> officers, of reportable compensation from the organization	n and any relate	ed orga	nızatı	ons	•			•	·	,000
• List all of the organization's <b>former directo</b> organization, more than \$10,000 of reportable co	ompensation fro	m the	orgar	nizat	ion	and ar	ny re	elated organizations	5	
List persons in the following order individual tru- compensated employees, and former such perso	ns	·						. ,		
L Check this box if neither the organization no	1	ʻganızat I	ion c			ated a	ny d	current officer, dire	ctor, or trustee	T
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	than o	ne b	ox, in of tor/t	t ch unle fice rust		son a	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
(1) Edward Blum	15 00									_
Executive Director		Х						120,000	0	0
(2) Edward Pfenninger	1 00			×				0	0	0
Secretary										
(3) Patricia Brooks Treasurer	1 00			x				0	0	0
				<u> </u>	<u> </u>	<u> </u>	<u> </u>			

Form 990 (2018) Page 8 Part VII Section AS Office 9, Director 5 3: Person Dray Employed 9, 4 for Highest Out/05/24 ed Pagloye of (25/21/24) (A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other is both an officer and a week (list from the from related compensation director/trustee) organization (Worganizations (Wany hours from the for related 2/1099-MISC) 2/1099-MISC) organization and Highest compensate individual trustee or director organizations related Institutional Trustee below dotted organizations employee line)

c Total from continuation sheets to Part VII, Section A . . . • 120,000 

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization > 1 Yes No

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on

line 1a? If "Yes," complete Schedule J for such individual . 3 No

3 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the

organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual . 4 Nο

5	tion or individual for	No	
S	ection B. Independent Contractors		
1	Complete this table for your five highest compensated independent contractors that received from the organization. Report compensation for the calendar year ending with or within the contractors.		nsation
	(A) Name and business address	(B) Description of services	(C) Compensation

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.						
	(A) Name and business address	(B) Description of services	(C) Compensation				

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization > Form 990 (2018)

Form 990 (2018)				Page <b>10</b>
Part IX Statement of Europe Statement of Europe Statement of Section 501(c)(3) and 501(c)(4) organizations must complete all columns to the section 501(c)(3) and 501(c)(4) organizations must complete all columns to the section of t	nent 49-16 F lumns All other orga	iled 04/05/21 nizations must comp	Page 11 of 2	25
Check if Schedule O contains a response or note to any	line in this Part IX .			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	120,000	96,000	12,000	12,000
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
<b>10</b> Payroll taxes				
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal	465,000	465,000	0	C
c Accounting				
<b>d</b> Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses	188	0	188	C
14 Information technology				
15 Royalties				
<b>16</b> Occupancy				
17 Travel	2,194	1,097	0	1,097
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
<b>20</b> Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	347	0	347	0
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a State Filing Fees	25	0	25	C
b				
с				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	587,754	562,097	12,560	13,097
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation  Check here □ if following SOP 98-2 (ASC 958-720)				

14

15

16

17 18

19

20

21

Net Assets or Fund Balance

27

28

29

30

31

32

33

34

Intangible assets .

Grants payable .

Deferred revenue .

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Other assets See Part IV, line 11 .

Tax-exempt bond liabilities . .

Accounts payable and accrued expenses

Total assets. Add lines 1 through 15 (must equal line 34) .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > \quad \text{and complete lines 30 through 34.}

Paid-in or capital surplus, or land, building or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees,

Bala@a\$belet20-cv-00763-RP Document 49-16 Filed 04/05/21 Page 12 of 25 Check if Schedule O contains a response or note to any line in this Part IX . Beginning of year End of year

Page **11** 

406.371 415,000

-8.629

-8,629

406,371

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14

15

16

17

18

19 20

21

27

28

29

30

31 32

33

34

296,397

296,397

296.397

1 Cash-non-interest-bearing	296,397	1	406,37
2 Savings and temporary cash investments		2	
<b>3</b> Pledges and grants receivable, net		3	

3	Pledges and grants receivable, net	3	
4	Accounts receivable, net	4	
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.	5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and		

	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	5	
S	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	6	
eta	7	Notes and loans receivable, net	7	
- SS	8	Inventories for sale or use	8	

		contributing employees and sponsoring organizations ( Part II of Schedule L.		6		
ets	7	Notes and loans receivable, net		7		
SS	8	Inventories for sale or use		8		
A	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D				
	l b	Less accumulated depreciation	10b	1 i	100	

		Part II of Schedule L				
ets	7	Notes and loans receivable, net	7			
\$8	8	Inventories for sale or use	8			
A	9	Prepaid expenses and deferred charges	9			
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		10a			
	b	Less accumulated depreciation		10c		
	11	Investments—publicly traded securities .	11			
	12	Investments—other securities See Part IV, line	12			
	13	Investments—program-related See Part IV. line	11 .		13	

D: H		key employees, highest compensated employees, and disqualified			
qei		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24)  Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	415,000

Sè		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and			
	26	Total liabilities. Add lines 17 through 25	0	26	415,000
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D		25	
	24	Unsecured notes and loans payable to unrelated third parties		24	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
		!			

Form	990 (2018)				Page <b>12</b>
Pa	t XI Recond ប្រាជា ខែជា ខេត្ត ខេត្ត Recond ប្រាជា ខេត្ត ខេត្ត Recond ប្រាជា ខេត្ត Recond ប្រាជា ខេត្ត Recond R	2 13 c	of 25		
	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			282,728
2	Total expenses (must equal Part IX, column (A), line 25)	2			587,754
3	Revenue less expenses Subtract line 2 from line 1	3			-305,026
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			296,397
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			-8,629
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				ĺ
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basis,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			ļ	
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii Audit Act and OMB Circular A-133?	ngle	3a	ļ	No

3b

Form **990** (2018)

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

## Case 1:20-cv-00763-RP Document 49-16 Filed 04/05/21 Page 14 of 25 **Software ID:** 18007482

Software Version:

**EIN:** 47-2593047

Name: Project on Fair Representation Inc.

Form 990 (2018)

Additional Data

Form 990, Part III, Line 4a: Corporation continued litigation in federal courts challenging government distinctions on the basis of race and ethnicity, including cases implicating voting rights and adoption riahts

efile	GR/			T PROCESS	As Filed Data -				3493316049739
SCI	IED	ULE A	se 1:20-0	V-00763-1 Public (	Charity Statu	49-16 Files	ed 04/05/2	1 Page 15 of	2NB No 1545-0047
	m 990		Com		ganization is a sect				2018
990E	<b>(Z</b> )			•	4947(a)(1) nonexe	empt charitable	trust.		2010
Depart	nent of	the Treasury		► Go to	Attach to Form www.irs.gov/Form				Open to Public
nterna	l Reven	ne Service ne organiza	tion					Employer identific	Inspection ation number
		r Representati							acion number
Pai	ŧΙ	Reason	for Public C	harity Statu	us (All organization	s must comple	te this part.) S	47-2593047 See instructions.	
					it is (For lines 1 thro				
1		A church, c	onvention of d	churches, or as	sociation of churches	described in <b>sec</b> t	tion 170(b)(1)	(A)(i).	
2		A school de	scribed in <b>sec</b>	tion 170(b)(	<b>1)(A)(ii).</b> (Attach Scl	nedule E (Form 9	90 or 990-EZ) )		
3		A hospital o	or a cooperativ	ve hospital serv	/ice organization desc	rıbed ın <b>section</b>	170(b)(1)(A)(	iii).	
4		A medical r		nization operate	ed in conjunction with	a hospital descri	bed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's
5		(b)(1)(A)	(iv). (Comple	te Part II )	-			ernmental unit descri	bed in <b>section 170</b>
6		A federal, s	tate, or local	government or	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	\)(v).	
7	<b>✓</b>	section 17	'0(b)(1)(A)(	<b>vi).</b> (Complete	Part II )			init or from the genera	al public described in
8		A communi	ty trust descri	bed in <b>section</b>	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in <b>170(b)(1)</b> ee instructions Enter			with a land-grant coll college or university	ege or university or a
10		from activit	es related to: וחכסme and נ	its exempt fun inrelated busin	ctions—subject to cer	taın exceptions, a	and (2) no more	ns, membership fees, than 331/3% of its su sses acquired by the c	pport from gross
11		An organiza	ation organize	d and operated	exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported	organizations d		09(a)(1) or sec	ction 509(a)(2	s of, or to carry out th  ). See <b>section 509(</b> = 12e 12f and 12g	
а		<b>Type I.</b> A so	supporting org n(s) the powe	anızatıon opera	ated, supervised, or c appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by of the supporting orga	
b		manageme	nt of the supp		ation vested in the sar			organization(s), by havinge the supported orga	
С					supporting organizatio			nd functionally integra	ted with, its
d		functionally	integrated T	he organization		fy a distribution i	requirement and	th its supported orgar I an attentiveness req	
e					ved a written determin integrated supporting		RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter	the number	of supported	organizations					
g					pported organization(	г'		T	T
	(i) N	lame of supp organization		(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organizers		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
T _ 4 - '									
Total		unule Dadee-	tion Act Nat	on one the To	structions for	Cat No 11285	<u> </u>	 	

organization

instructions

supported organization

Е	Part II Supports Schedule (1011)	ordaniza Fon SI	nesamentia 9 e	trion File or by	1/05/2/iv) Pia	0 Cb 1/61 γα Δ Ω 5 i 1	. and 170
	(b)(1)(A)(ix)	_					
	(Complete only if you che						under Part
	III. If the organization fa	ils to qualify und	ler the tests liste	ed below, please	complete Part	III.)	
S	Section A. Public Support					T	
	Calendar year	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and						
-	membership fees received (Do not	0	1,558,479	18,854	97,250	282,728	1,957,311
	include any "unusual grant ")		, ,	<i>'</i>	<u>'</u>	,	
2	Tax revenues levied for the						
	organization's benefit and either paid						0
_	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						0
	the organization without charge						·
4	Total. Add lines 1 through 3	0	1,558,479	18,854	97,250	282,728	1,957,311
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						675,769
	supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from						1 201 542
	line 4						1,281,542
S	Section B. Total Support						
	Calendar year	(a)2014	<b>(b)</b> 2015	<b>(c)</b> 2016	(d)2017	(e)2018	(f)Total
_	(or fiscal year beginning in) ▶	(-,			• •	• /	
7	Amounts from line 4 Gross income from interest,	U	1,558,479	18,854	97,250	282,728	1,957,311
8	,						
	dividends navments received on						0
	dividends, payments received on securities loans, rents, royalties and						O
	dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	securities loans, rents, royalties and income from similar sources Net income from unrelated business						
9	securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the						0
_	securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on						
9 10	securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or						
_	securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on						0
_	securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through						0
10 11	securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10						0
10 11 12	securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, e					12	0 0 1,957,311
10 11 12	securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10			d, fourth, or fifth t	ax year as a sect		0 0 1,957,311
10 11 12	securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, e	the organization's	first, second, thir			on 501(c)(3) organ	0 0 1,957,311
10 11 12 13	securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, e	the organization's	s first, second, thir			on 501(c)(3) organ	0 0 1,957,311
10 11 12 13	securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, efirst five years. If the Form 990 is for check this box and stop here	the organization's	s first, second, thir 			on 501(c)(3) organ	0 0 1,957,311
10 11 12 13	securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, efirst five years. If the Form 990 is for check this box and stop here	Support Perce	s first, second, thir entage ided by line 11, co			on 501(c)(3) organ	0 0 1,957,311 nization,
10 11 12 13 S 14 15	securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, e  First five years. If the Form 990 is for check this box and stop here	Support Perce 6, column (f) dividedule A, Part II, lii	s first, second, thin entage uded by line 11, cone ne 14	lumn (f))		14 15	0 0 1,957,311 nization,
10 11 12 13 S 14 15	securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, effirst five years. If the Form 990 is for check this box and stop here	Support Perce e 6, column (f) div sedule A, Part II, lii organization did no	entage Ided by line 11, cone 14 of check the box of	lumn (f))		14 15	0 1,957,311 nization, 0 %
10 11 12 13 S 14 15 16a	securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, e  First five years. If the Form 990 is for check this box and stop here	Support Perce e 6, column (f) dividedule A, Part II, lii organization did no ries as a publicly su	s first, second, thir entage ided by line 11, co ne 14 ot check the box of upported organizat	lumn (f)) n line 13, and line on	14 is 33 1/3% or	14	0 1,957,311 nization, 0 %

17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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Schedule A (Form 990 or 990-EZ) 2018

Part III

Page 3

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Support Schedule 60.766 gardzations consumbled in Section 8090 at (12)/21 Page 17 of 25

		4				<i></i>	
Se	ection A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	<b>(d)</b> 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
_	under section 513						
4	Tax revenues levied for the organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6 )						
Se	ection B. Total Support						
	Calendar year	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
_	(or fiscal year beginning in) ▶			. ,	, ,	. ,	<b> </b>
	Amounts from line 6						
L0a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI )						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization	ı's fırst, second, tl	nird, fourth, or fift	h tax vear as a se	ection 501(c)(3)	organization,
-	check this box and <b>stop here</b>	-			,	,	▶ □
Se	ection C. Computation of Public	Support Perce	ntage				<del></del>
15	Public support percentage for 2018 (lir			column (f))		15	0 %
16	Public support percentage from 2017 S	. , ,		(1)		16	0 /
	ection D. Computation of Invest					10	
17	Investment income percentage for 20:			line 13. column (f	))	17	0 %
18	Investment income percentage from 2	,		, (1	,,	18	0 7
	331/3% support tests—2018. If the			on line 14 and lin	e 15 is more than		ne 17 is not
	• • • • • • • • • • • • • • • • • • • •	-		·			_
	more than 33 1/3%, check this box and a 33 1/3% support tests—2017. If the	•	-				<b>▶</b> ∐ /3% and line 18 is

not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Suppleting biggnesstations 63-RP Document 49-16 Filed 04/05/21 Page 18 of 25 (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2) 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below За Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under sections

501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c

Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the

organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a amendment to the organizing document)

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

5b

organization's organizing document?

Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (1) its supported organizations. (11) individuals that are part of the charitable class benefited by one or more of its

6

7

8

the organization had excess business holdings)

7

8

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ) Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

9a

organization had an interest? If "Yes," provide detail in Part VI. 9b

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below

	rt IV <b>Supp ြեւթե մ</b> եցներ մեն <b>Հարասին Ար</b> անգայան անձագրայան անձագր	5		age 3			
	Tappedag Ligation (Commission Commission Com		Yes	No			
11	Has the organization accepted a gift or contribution from any of the following persons?						
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the						
	governing body of a supported organization?	11a					
b	A family member of a person described in (a) above?	11b					
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c					
S	ection B. Type I Supporting Organizations						
			Yes	No			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1					
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that						
	operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting						
	organization	2					
S	ection C. Type II Supporting Organizations						
			Yes	No			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of						
	each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1					
<u> </u>	ection D. All Type III Supporting Organizations						
	section of Air Type 222 outporting organizations		Yes	No			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?						
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)						
2							
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard						
		3					
	ection E. Type III Functionally-Integrated Supporting Organizations						
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructi	ons)					
•	The organization satisfied the Activities Test Complete line 2 below						
	The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below						
•	The organization supported a governmental entity Describe in <b>Part VI</b> how you supported a government entity (see	ınstru	ctions)				
2	Activities Test Answer (a) and (b) below.		Yes	No			
;	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	<b>2</b> a					
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b					
3	Parent of Supported Organizations Answer (a) and (b) below.						
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a					
ı	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b					

**Additional Data** Case 1:20-cv-00763-RP Document 49-16 Filed 04/05/21 Page 22 of 25 **Software ID:** 18007482 Software Version: **EIN:** 47-2593047 **Name:** Project on Fair Representation Inc. Schedule A (Form 990 or 990-EZ) 2018 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions) Facts And Circumstances Test

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SCHEDUL (Form 990 or EZ)	L <b>E O</b> r 990-	Complete to pro	vide information fo r 990-EZ or to prov	49-16 Filed 04/05/20  On to Form 990 or \$  r responses to specific quest ide any additional information 990 or 990-EZ.	ions on	2018
Department of the	Open to Public Inspection					
Name Betherof Project on Fair Re		nc			Employer identif	fication number
990 Schedul	le O, Supp	lemental Information	n			
Return Reference				Explanation		
Pt VI, Line 11b	Complete	Form 990 was distributed	to all officers and to le	egal counsel for review		

990 Schedule O, Supplemental Information Case 1:20-cv-00763-RP Document 49-16 Filed 04/05/21 Page 24 of 25 Return Explanation Reference Pt VI, Line Legal counsel requires written annual conflict of interest responses

990 Schedule O, Supplemental Information Case 1:20-cv-00763-RP Document 49-16 Filed 04/05/21 Page 25 of 25 Return Explanation Reference Pt VI, Line Organization paid compensation to only one officer in 2018. The compensation package was d 15a etermined after review of compensation packages of comparable organizations